

MINISTRY OF PUBLIC HEALTH - MEDICAL STATISTICS CENTER

**PUBLIC HEALTH  
IN THE PEOPLE'S  
REPUBLIC  
OF BULGARIA  
DURING THE YEARS  
OF PEOPLE'S  
GOVERNMENT  
1944-1968**

**S O F I A, 1969**







The People's Republic of Bulgaria occupies 110 911.5 sq.km., averaging 75.2 inhabitants per square kilometer.

In 1967 the settlements throughout the country amount to 5698, of which 136 towns, 38 communities of urban type and 5523 villages.

The country is divided into 28 administrative districts, with the town of Sofia representing an independent district.

The capital of the P.R. of Bulgaria - Sofia - has 832 177 inhabitants.

There are four more towns with population ranging from 100 000 to 500 000 inhabitants, namely Plovdiv, Varna, Russe, Bourgas, and 27 towns with population ranging from 25 000 to 100 000 inhabitants.

The population of the P.R. of Bulgaria amounts to 8 335 126 inhabitants according to data of the 1967 census. In comparison to the preceding year, it was augmented with 51 103 inhabitants.

The urban population proportion is rapidly increasing and in 1967, 48.5 % of the total number were living in the towns and 51.5 per cent - in the villages (Table 1).

T a b l e 1

The Population of Bulgaria covering the period 1944-1967  
(at the end of the year)

Year	Total	Towns		Villages	
		Absolute number	Percentage	Absolute number	Percentage
1944	6913300	1665500	24.1	5247800	75.9
1948	7162200	1888200	26.4	5274000	73.6
1953	7385600	2241800	30.4	5143800	69.6
1958	7766300	2732100	35.2	5034200	64.8
1963	8111100	3306700	40.8	4804400	59.2
1967	8335100	4043300	48.5	4291800	51.5



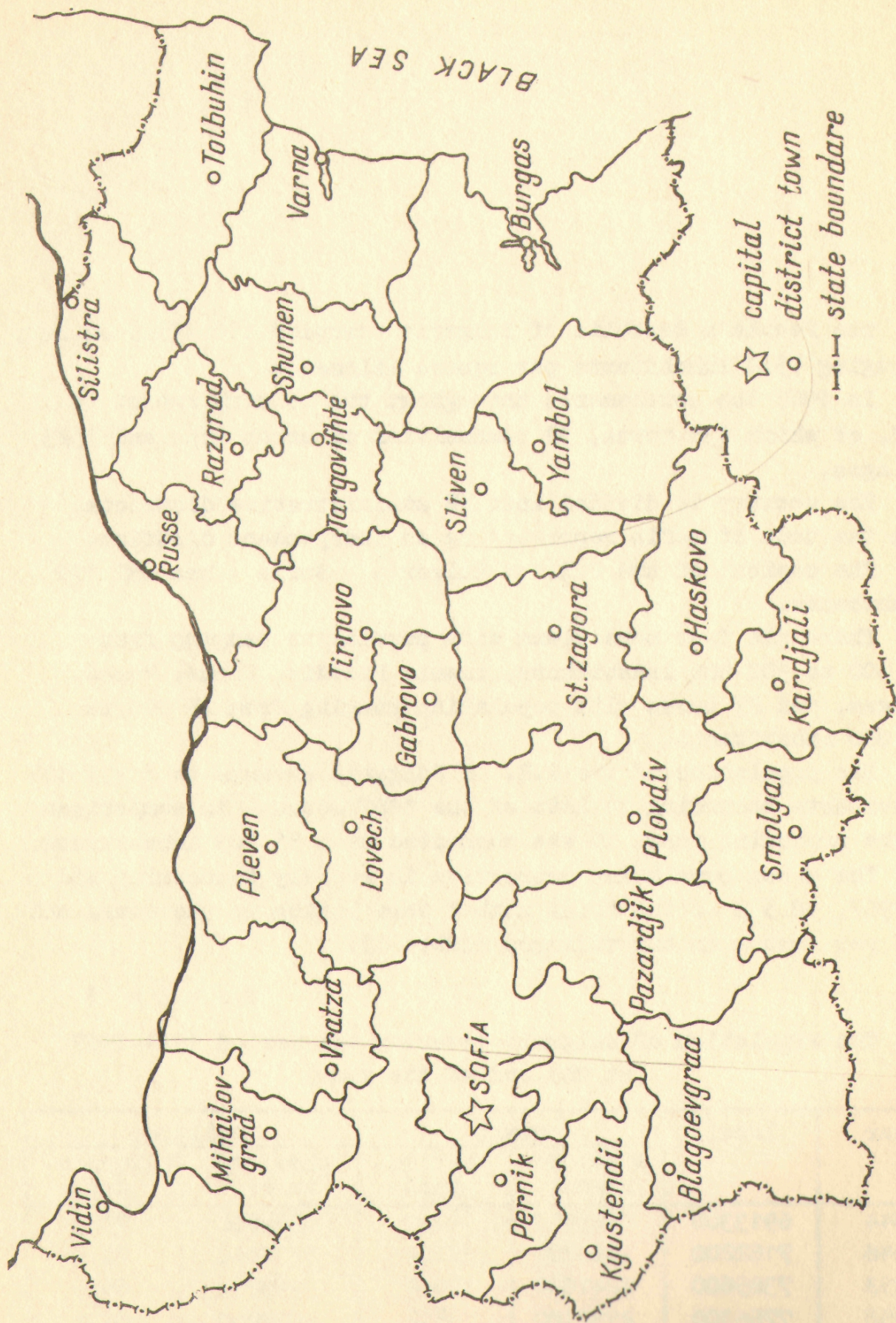


Fig. 1. The People's Republic of Bulgaria



The migration of peasant population into the towns occurs at the expense mainly of the younger population, rendered imperative by the industrialization process on a nationwide scale, developing at a very high rate.

The sex distribution of the population shows equal male to female ratio - 50 % for males and 50 % for females. In the towns the relative part of men is slightly higher than that of women (50.2 % males against 49.8 % for females), while in the villages it is contrary - the relative share of females is slightly higher than that of males (49.8 % males against 50.2 % females).

The demographic development of the country during the years of people's government is characterized by reduction of the overall mortality rate. Infantile mortality rate was also sharply lowered - from 120.6 per 1000 born alive in 1944, it falls to 33.1 for 1967, and, according to preliminary data submitted for 1968 - to 28.2.

Similar achievements resulted from the great cares on behalf of the people's government for amelioration of living (economic-al) standards of the nation as well as from the constant and timely provided medical assistance by health workers for infantile health prophylaxis.

Ever since 1944, the birth rate on a nationwide scale has augmented, reaching 25.2 per 1000 population in 1950; thereafter it showed a tendency for decrease. As a result of the special steps undertaken by the Government, an increase of the same is envisaged and, according to preliminary data for 1968, it shows 17.0 live births per 1000, i.e. an increase of about 2.0 per 1000 inhabitants. (Table 2 and Figs. 2 and 3).

T a b l e 2

Demographic development of the Population in Bulgaria  
over the period 1944-1968

Years	Mar- riages	Divorces	Live- births	Deaths	Natural growth	Deaths in the first year of life per 1000 livebirths
	per 1000 inhabitants					
1944	9.2	.1/	21.9	13.6	8.3	120.6
1948	11.1	.1/	24.6	12.6	12.0	118.2
1953	9.3	0.6	20.9	9.3	11.6	80.8
1958	9.1	0.8	17.9	7.9	10.0	52.2
1963	8.2	1.0	16.4	8.2	8.2	35.7
1967	8.7	1.2	15.0	9.0	6.0	33.1
1968 <sup>2/</sup>	.	.	17.0	8.6	8.3	28.2

1/ No data available.

2/ Preliminary data



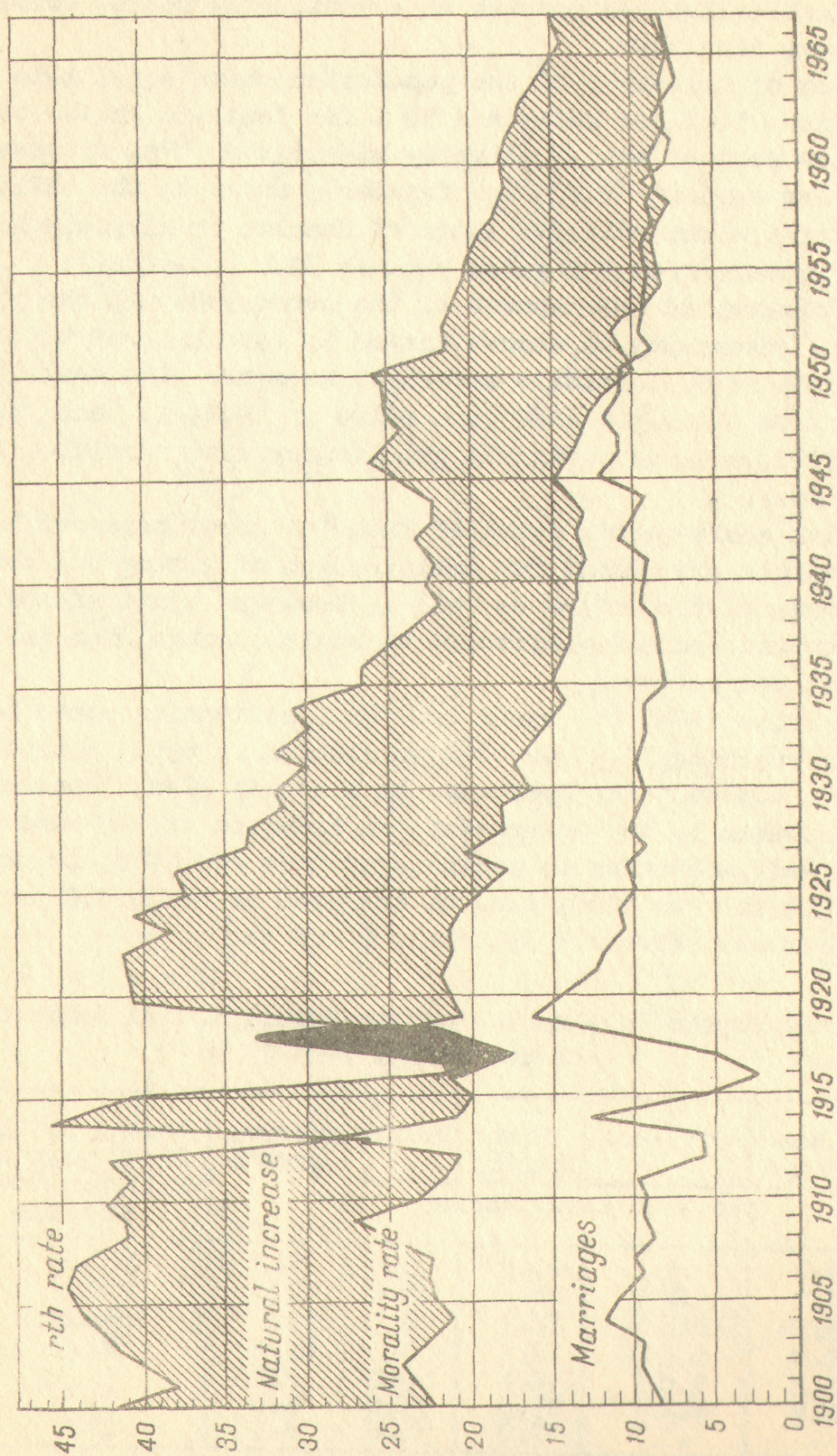


Fig. 2. Marriages, Birth and Mortality Rate per 1000 Inhabitants over the Period 1900-1967.



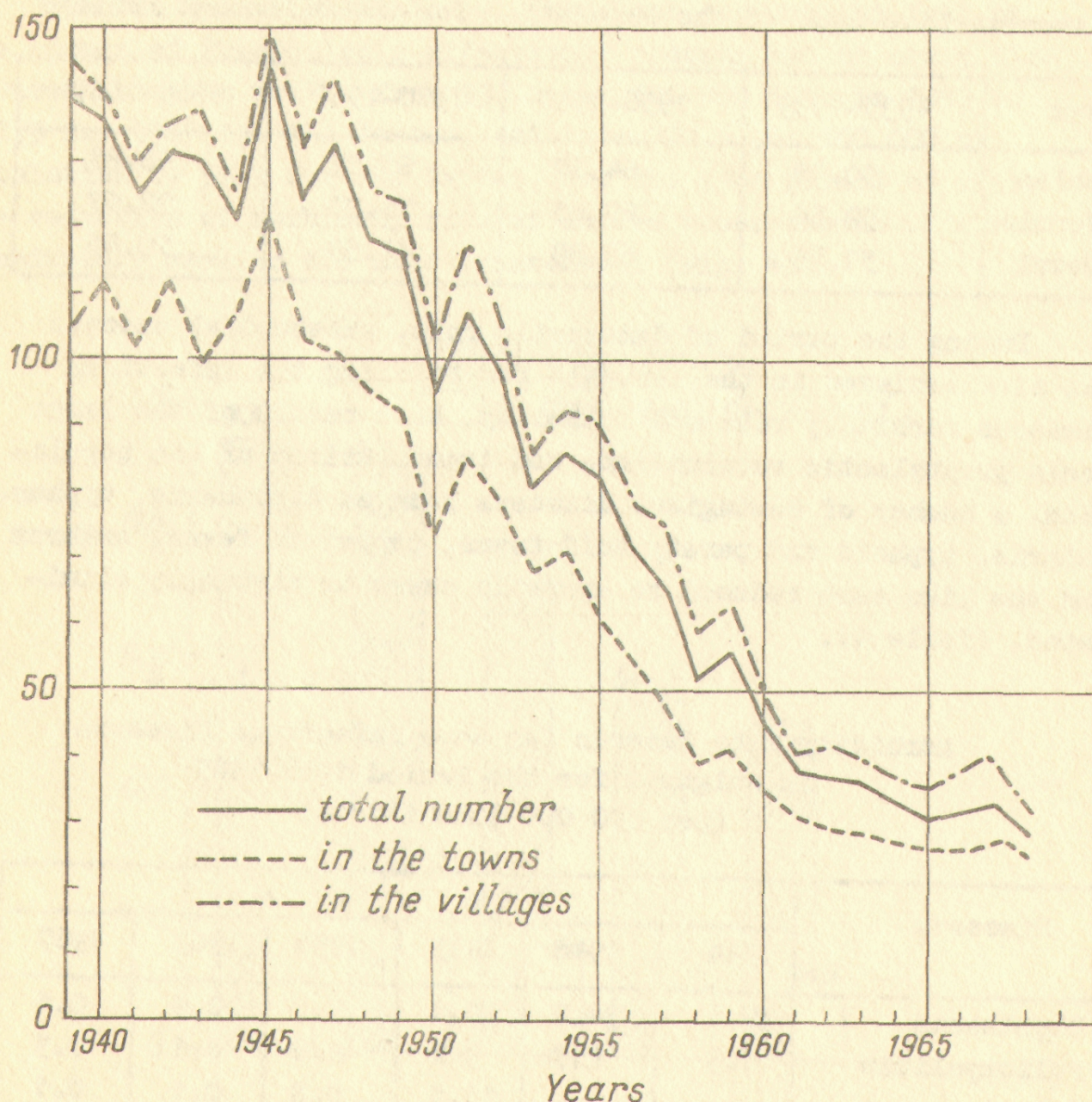


Fig. 3. Mortality Rate Among Children Covering the Period 1939-1967. (Children Deaths During the First Year of Life per 1000 Livebirths).

The most reliable index of the people's government cares for public health and social welfare is the constant increase of the average life-span.

Whereas during the period 1935-1939 the mean life duration was 52 years (51 for men and 53 for women), in the period covering 1965-1967 it is augmented to 71 years (69 for men and 73 for



women) (Table 3).

T a b l e 3

Average Life-Span of the Population for the Different Periods

Sex	1935-1939	1956-1957	1960-1962	1965-1967
Males	50.98	64.17	67.82	68.81
Females	52.56	67.65	71.35	72.67
Total	51.75	65.89	69.59	70.66

During the period of democratic rule, substantial success was also achieved in the struggle for reducing the infectious diseases morbidity rate and lethality. As a result of the large scale prophylactic vaccinations and immunizations of the population, a number of contagious diseases such as diphtheria, typhus, malaria, typhoid and paratyphoid fever, pappataci fever, anthrax and the like were reduced to sporadic cases or virtually eliminated. (Table 4).

T a b l e 4

Morbidity Rate Records for Some Infectious Diseases  
in Bulgaria for the Period 1944-1967  
(per 100 000 inhabitants)

Diseases	Y e a r s					
	1944	1948	1953	1958	1963	1967
Diphtheria	57.1	34.2	30.1	5.7	0.9	0.1
Poliomyelitis	1.5	2.7	3.2	2.0	0.1	0.5
Malaria	.		11.1	0.8	0.1	0.1
Pappataci fever	-	2.9	8.7	1.0	0.0	-
Typhoid fever	5.7	10.0	1.9	2.2	0.6	0.4
Anthrax (Black spaul)	7.4	20.6	11.8	5.7	2.9	0.7
Tetanus	3.3	5.0	3.9	3.4	1.6	1.0

Very great cares are provided by the Government for tuberculosis patients and contact cases, including free of charge treatment, in domiciliary environment as well, sanatorial and



resort therapy and rest, obligatory dispensarization, periodic check-ups of the condition etc.

Such an active attitude brought about a permanent fall of the number of tuberculosis affections' records and of newly discovered cases as well - from 936.2 per 100 000 inh. in 1953 to 472.9 for 1967 for the former, and from 397.5 per 100 000 of population to 98.9 for the latter, for the same period of time. The reduction of morbidity rate of active tuberculosis of the respiratory ways is the most substantial (Fig. 4).

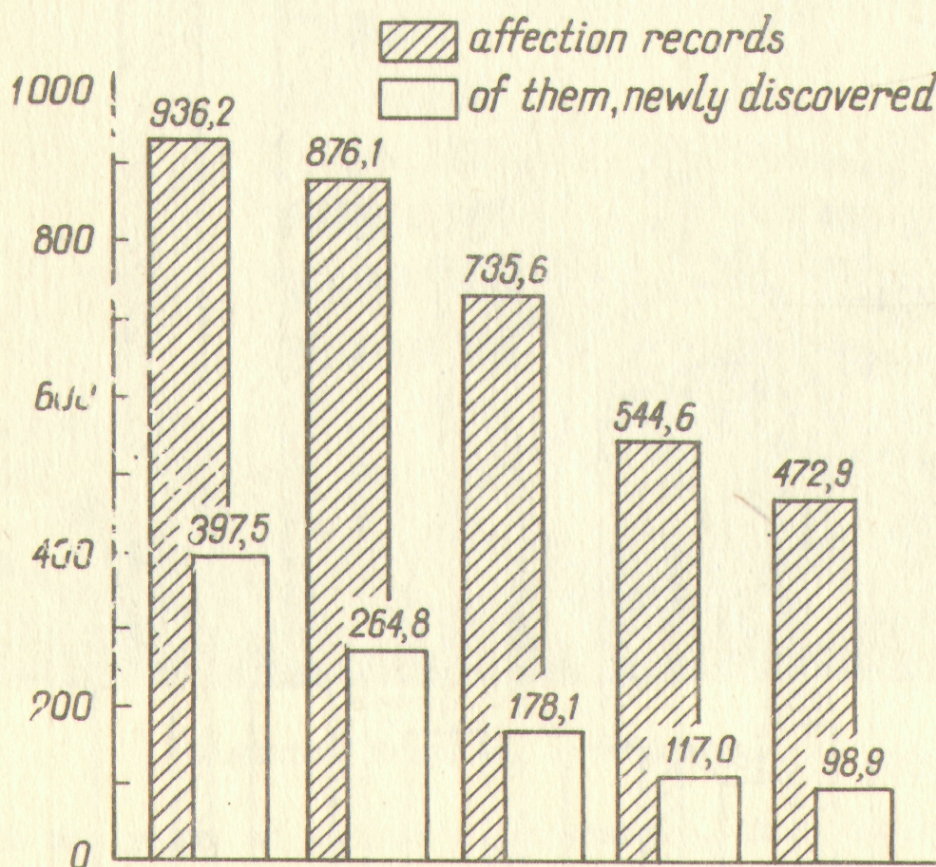


Fig. 4. Incidence of Tuberculosis Affections Recorded in Bulgaria (per 100 000 inhabitants).

The tuberculosis mortality rate has shown a 4.5-fold fall or from 62.1 for 1952, it was reduced to 14.0 per 100 000 in 1966.

In recent years, the affection records and the newly discovered patients with Ca and other malignant neoplasms reveal a



tendency towards rising - a phenomenon observed throughout the world (Fig. 5).

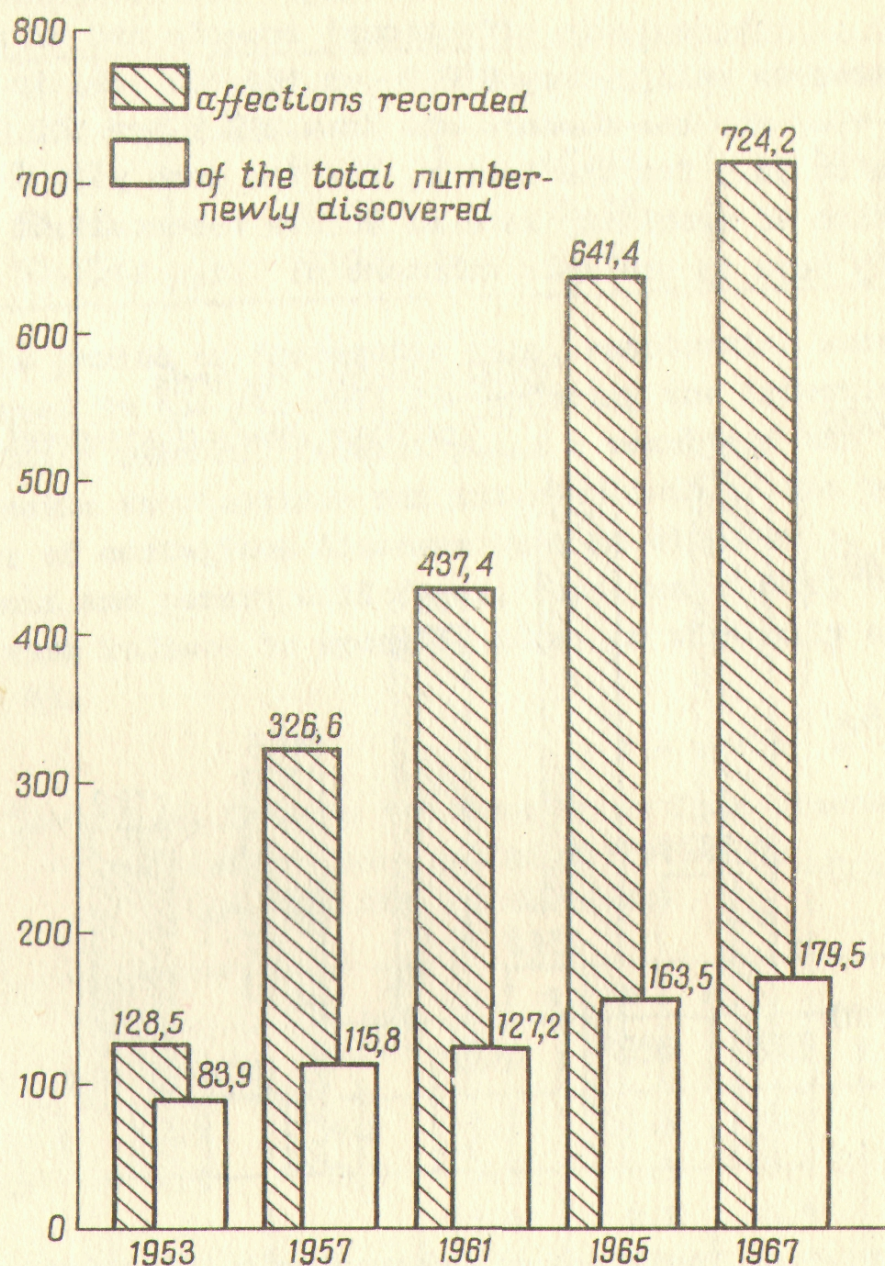


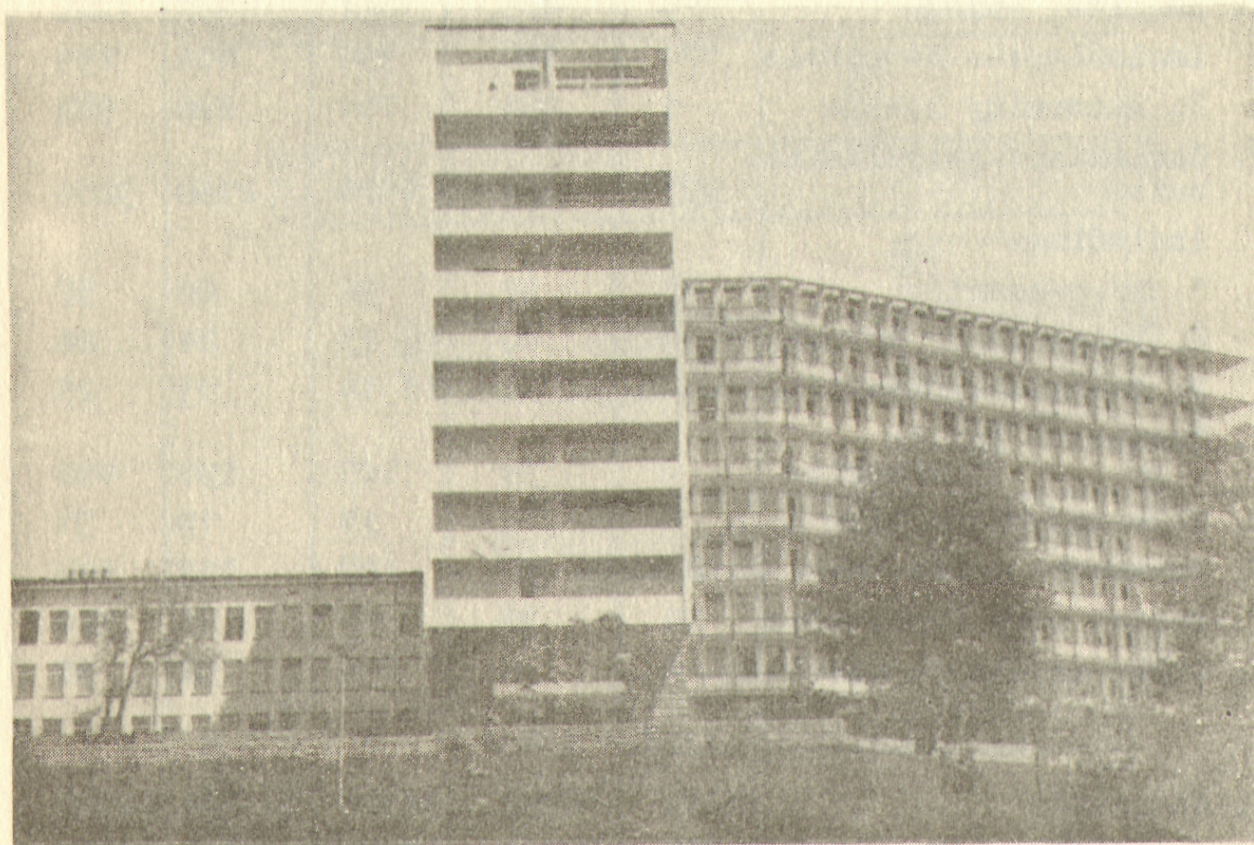
Fig. 5. Incidence of Carcinoma Affections Recorded in Bulgaria (per 100 000 inhabitants).

No doubt, the improved work of the oncologic and general health service network for oncological patients, the application



of new diagnostical methods and means for early detection and treatment have contributed greatly to the increase of the number of registered cases with carcinoma affections.

The health authorities and units throughout the country are taking all necessary steps for providing hospitalization and active attitude with respect to oncological patients.



District Hospital - Gabrovo

In the years of people's government, the number of hospital units with available beds have rapidly increased. From 174 with 11232 beds during 1944, the number of hospital units is increased to 1228 with 54709 beds for 1967 (Table 5, Fig. 6). The number of beds available for the population grows from 16 per 10 000 in 1944 to 70 in 1967 (Table 6).

Out-patient (ambulatorial) and polyclinical units were likewise greatly increased: from 995 for 1944 they augment to 3261 for 1967. (Table 5).



Table 5

Development of the Public Health Network in P.R. of Bulgaria  
over the Period 1944-1967

	Y e a r s :				
	1944	1948	1954	1960	1967
	N u m b e r o f u n i t s				
I. Hospital units,	175	475	1057	1357	1228
including: 1. Hospitals	174	120	334	461	291
2. Maternity houses	1	354	714	886	929
II. Outpatient-polyclinical units	995	1689	1576	2160	3261
including:					
1. Dispensaries	45	82	92	60	57
2. Independent polycl.	-	60	25	24	26
3. Stomatol.polyclinics	-	2	14	13	25
III. Permanent public nurseries	-	39	105	191	412
IV. Maternity/Infantile home	7	6	15	19	31
V. Sanitary-resort units	20	35	107	153	174
VI. Social care institutes	26	31	57	85	126
VII. Other health institutes	4	6	159	52	30
	N u m b e r o f b e d s				
I. Hospitals	11232	18392	31320	41334	54709
including: 1. Hospitals	11082	15634	27605	36912	50552
2. Maternity houses	150	2720	2755	2922	2993
II. Outpatient-Polycl. units	-	325	3206	2949	3384
including:					
1. Dispensaries	-	320	2440	2380	2836
2. Independent polycl.	-	-	60	-	-
3. Stomatol. polycl.	-	-	-	-	-
III. Permanent public nurseries	-	1625	4450	9720	27432
IV. Maternity/Infantile home	284	527	960	1280	2218
V. Sanitary-resort units	2134	2356	7280	12523	15659
VI. Social care institutes	-	1205	2790	5111	9774
VII. Other health institutes	-	-	38	57	65



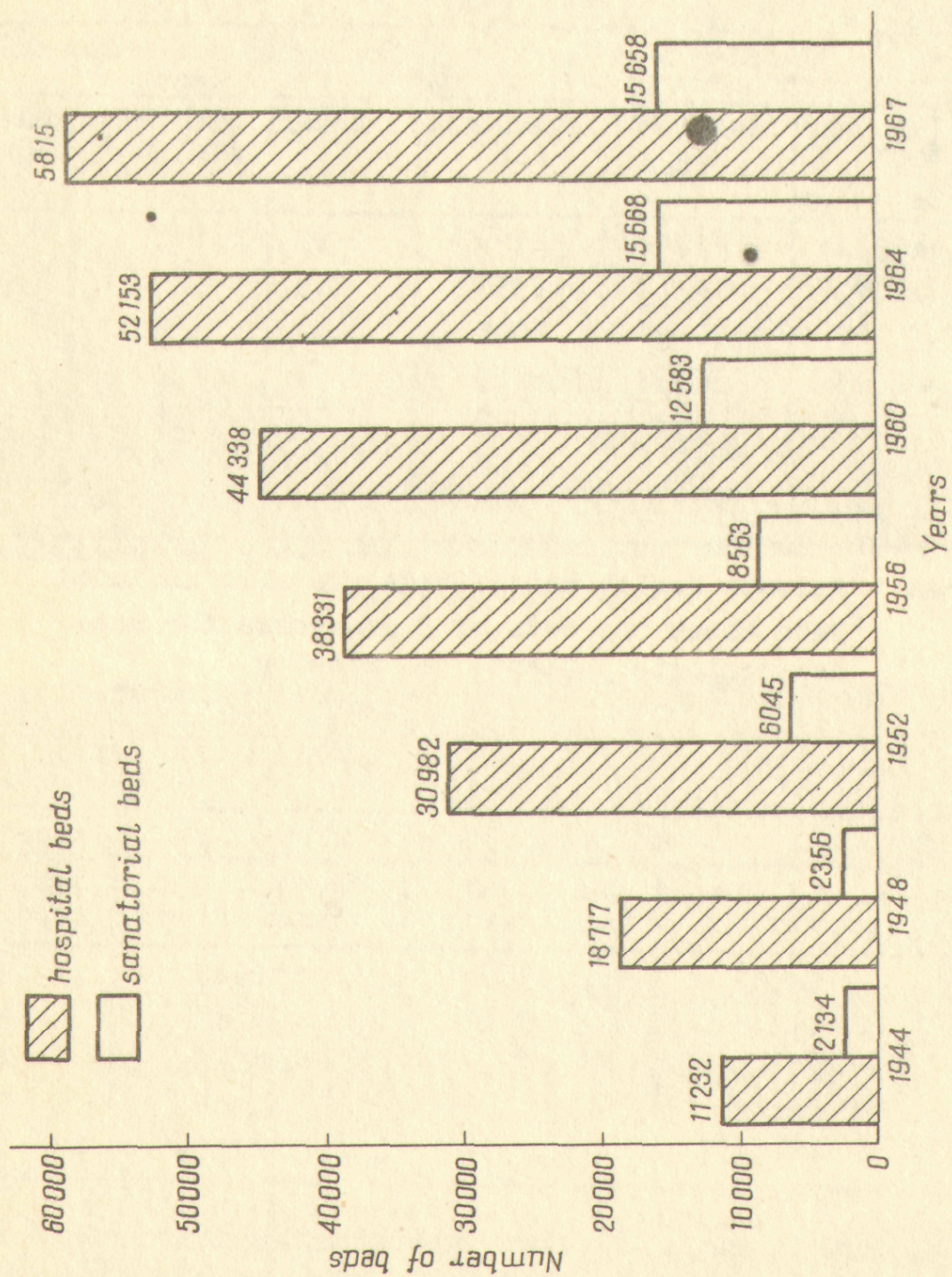


Fig. 6. Hospital and Sanatorial Beds in Bulgaria.



T a b l e 6

Available Beds in Hospitals and Sanatoria in Bulgaria  
for the Period 1944-1967

/a/

Years	Number of beds			Available per 10000 inhabitants		
	Total	Hospital	Sanatorial	Total	With hospital beds	With sanatorial beds
1944	13366 <sup>1/</sup>	11232	2134	19	16	3
1948	21073	18717	2356 <sup>2/</sup>	29	26	3
1952	37027	30982	6045	51	43	8
1956	46894	38331	8563	61	50	11
1960	56861	44338	12523	72	56	16
1964	67821	52153	15668	83	64	19
1967	73817	58158	15659	89	70	19

Note: <sup>1</sup>Private health units' beds are also included

<sup>2</sup>Data about the beds of 3 sanatoria for non-tuberculosis patients are missing

/b/

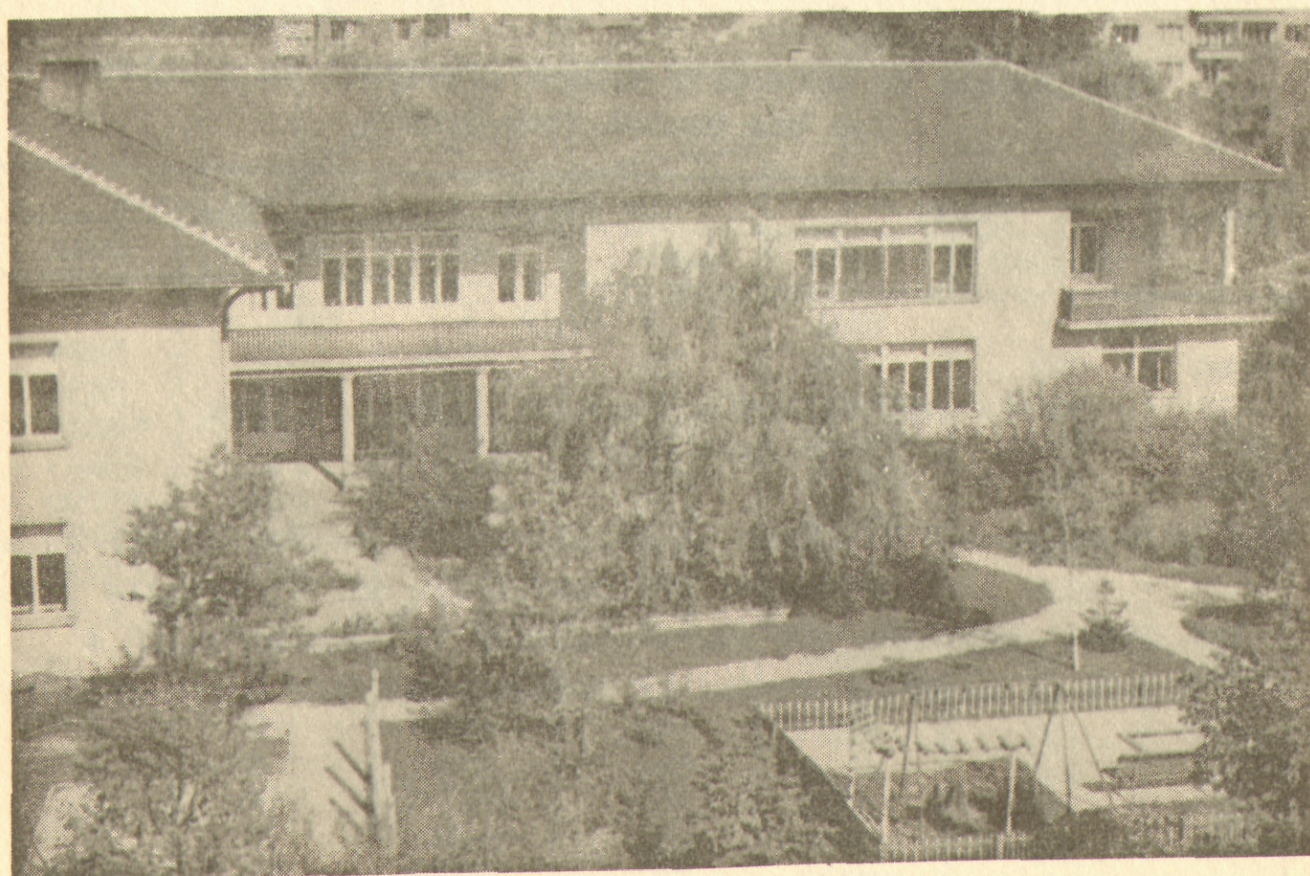
Years	Utilized beds out of the total number			
	by the urban population	per 10000 population	by the rural population	per 10000 population
1952	12537	59	18445	36
1956	17216	67	21115	42
1960	20660	69	23678	48
1964	28228	76	23925	53
1967	31286	77	26872	63

The data in Table 6-b show a substantial increase of hospital services available for the rural population, as well as a trend for its levelling with that available for urban population.





County Health Service



Public Nursery - Sofia



The achievements in the field of rural health services are considerable. Whereas during 1945, the rural population medical service was accomplished by no more than 614 qualified medical units (with a doctor in charge) and 199 outpatient units (with assistant doctor in charge), in the years of people's government they have grown accordingly to 1357 units directed by doctors and 1623 - directed by assistant doctors. Regardless of the fact that the number of peasant population is constantly decreased at the expense of urban population, the number of medical health services in villages has shown a severalfold increase.

A basic concern of the people's government is providing adequate cares for the health and wellbeing of younger generations. The large number of infantile health units and beds available in them constitute a proof in this respect.

Whereas during 1944 there were only 7 maternity and infantile homes with 280 beds and not a single public nursery (creche), in 1967 the maternity/infantile homes grow up to 31 with 2218 beds, whilst the permanent maternity houses - to 412 with 27432 places available. In addition, 674 seasonal creches with 17466 beds were established throughout the country (Table 7, Fig. 7). Thus favourable conditions are provided for adequate

T a b l e 7

Development of Maternity Houses (Creches) in Bulgaria  
for the Period 1949-1967

Years	Total		In towns		In villages	
	number	beds	number	beds	number	beds
	t o t a l					
1949	109	3708	39	1834	70	1874
1952	306	8961	92	3923	214	5038
1955	736	19498	130	5270	606	14228
1958	788	22121	151	6500	637	15621
1961	717	25099	219	12399	498	12700
1964	1104	40310	316	21031	788	19279
1967	1086	44898	359	25681	727	19217
	P e r m a n e n t M a t e r n i t y H o u s e s					
1949	37	1774	.	.	.	.
1952	78	3608	74	3468	4	140
1955	127	5180	118	4940	9	240
1958	149	6395	141	6195	8	200
1961	217	12250	203	11875	14	375
1964	309 <sup>1/</sup>	20700	273	19628	36	1072
1967	412 <sup>1/</sup>	27432	332	24928	80	2504

<sup>1/</sup> Including permanent maternity houses, supported by Cooperative Farms.



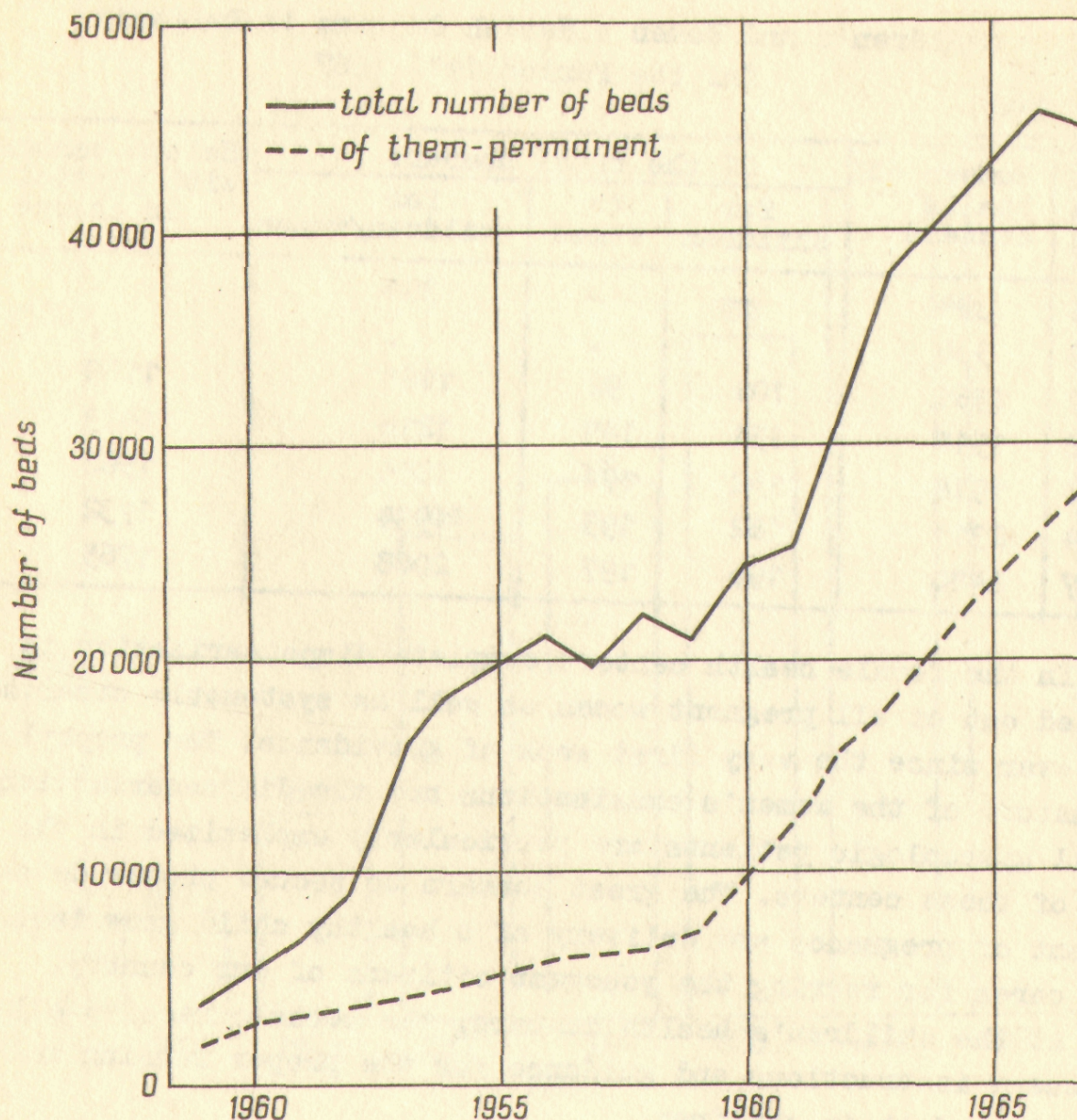


Fig. 7. Number of Beds in Public Nurseries over the Period 1949-1967.

cares and education of the children, enabling the mothers to put their efforts in the production and research.

A dense network of health centers for children, women and children-women has been created in Bulgaria (Table 8, Fig. 8).



T a b l e 8  
Children's and Women's Health Centers in Bulgaria  
for the Period 1944-1967

Years	Number of health centers	Of the total number:			Health centers with physician in charge
		for children	for women	for children/women	
1944	394	-	-	394	.
1948	580	.	.	.	.
1952	1361	101	92	1168	1189
1956	1518	151	149	1218	1413
1960	1918	152	171	1595	1568
1964	2311	182	195	1934	1732
1967	2480	195	197	2088	1765

In the female health centers complete dispensarization is carried out of all pregnant women as well as systematic observation ever since the very first week of gravidance. The prophylactic nature of the women's examinations and the dispensarization of all gynecologic patients are particularly emphasized in the work of these centers. The great concern to secure proper development of pregnancy and delivery of a healthy child grow into warm cares for rearing the youngest citizens of our country.

At the children's health centers, the mothers receive all necessary instructions and guidance for the proper rearing and education of their children.

Significant successes have been achieved by children's health centers insofar dispensarization is concerned by inclusion in special observation lists of all children as early as in the first month of life. Whilst in 1952, the percentual of dispensarized hardly amounted to 33.3 %, in 1967 it was already 95.2 % of all the children, admitted for observation in the centers within the first month of life.

We are fully justified and proud to state that there are few countries in the world where the maternal health problems are being attended and solved on such a wide scale and so efficiently. The requirement that each delivery takes place in a hospital unit or maternity home is of paramount importance for



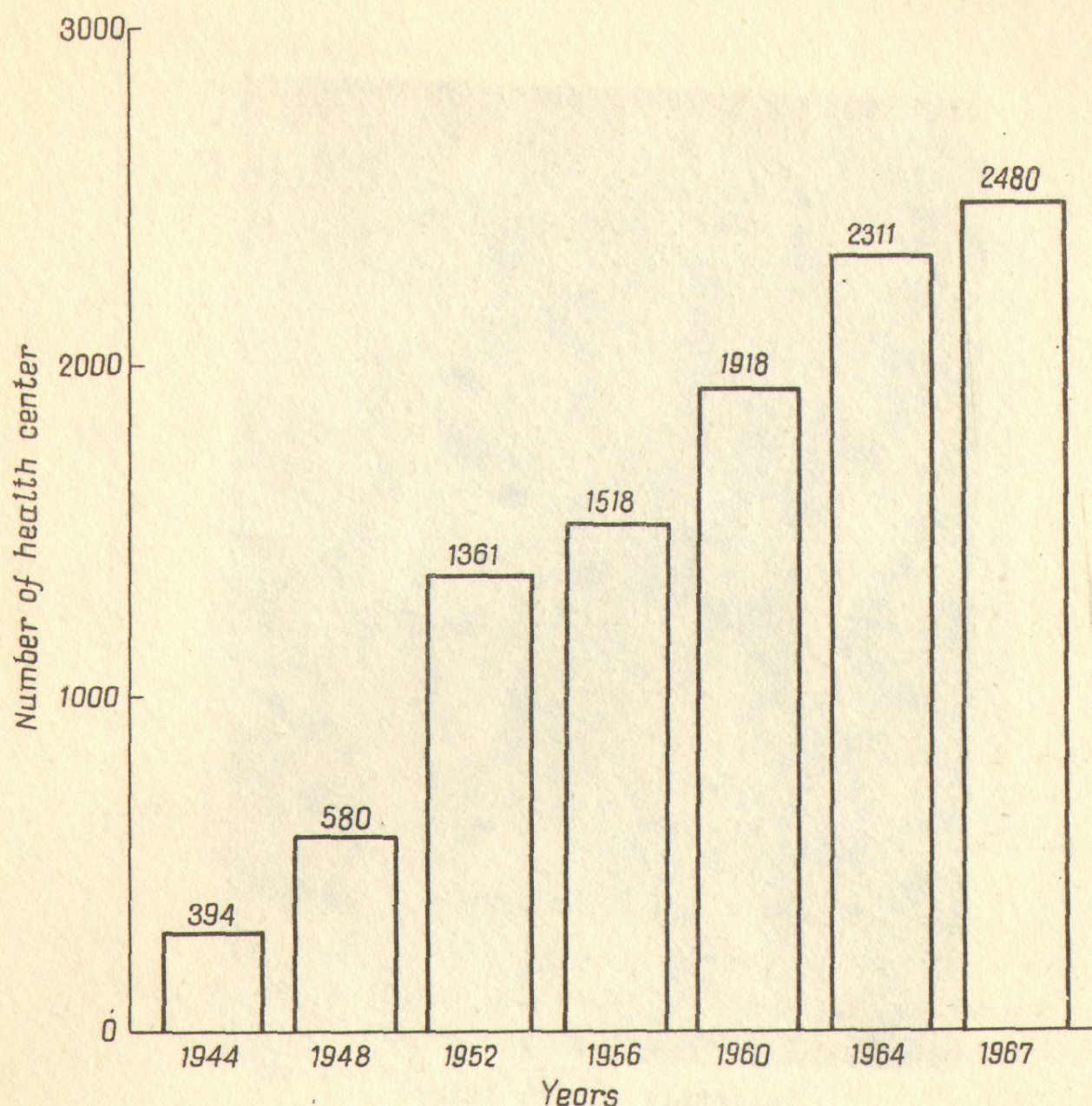


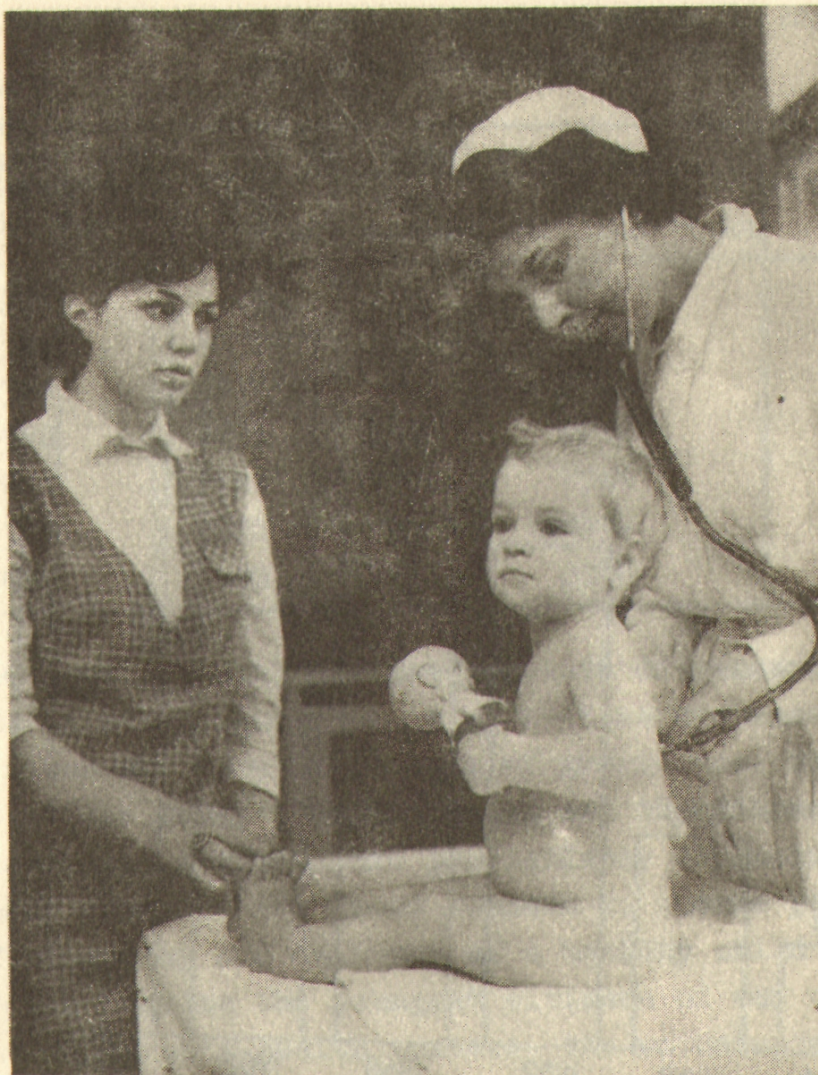
Fig. 8. Health Centers for Children and Women in Bulgaria.

the state and organization of obstetrical aid.

While in 1945 only 38.6 % of all deliveries in the towns occurred in hospitals and maternity homes, in 1967 almost all births (99.5 per cent) took place in specialized institutions and under the control of qualified doctor.

Much more conspicuous is the achievement of maternity-obstetrical aid in the villages where the deliveries in hospitals from 4 % for 1945 have risen to 91.3 % for 1967 (Fig. 9).





Infantile Health Center

Many efforts are made also for securing normal life conditions for solitary old people and individuals with severe physical and mental defects. In 1967, 126 social service units have been established with 9774 beds against 26 asylums for old in 1944 (Table 5).

During the years of people's government, the number of qualified medical personnel quickly increased - thus, physicians from 3516 in 1944 are augmented to 14466 in 1967, i.e. more than four-fold increase, whilst stomatologists - from 824 to 3013 or more than 3 and a half times.

In our country 174 sanatorial units with 15659 beds have been established for providing sanatorial-resort treatment against 20 units with 2134 beds during 1944. Or else, the sanatorial beds available per 10000 population has increased from 3



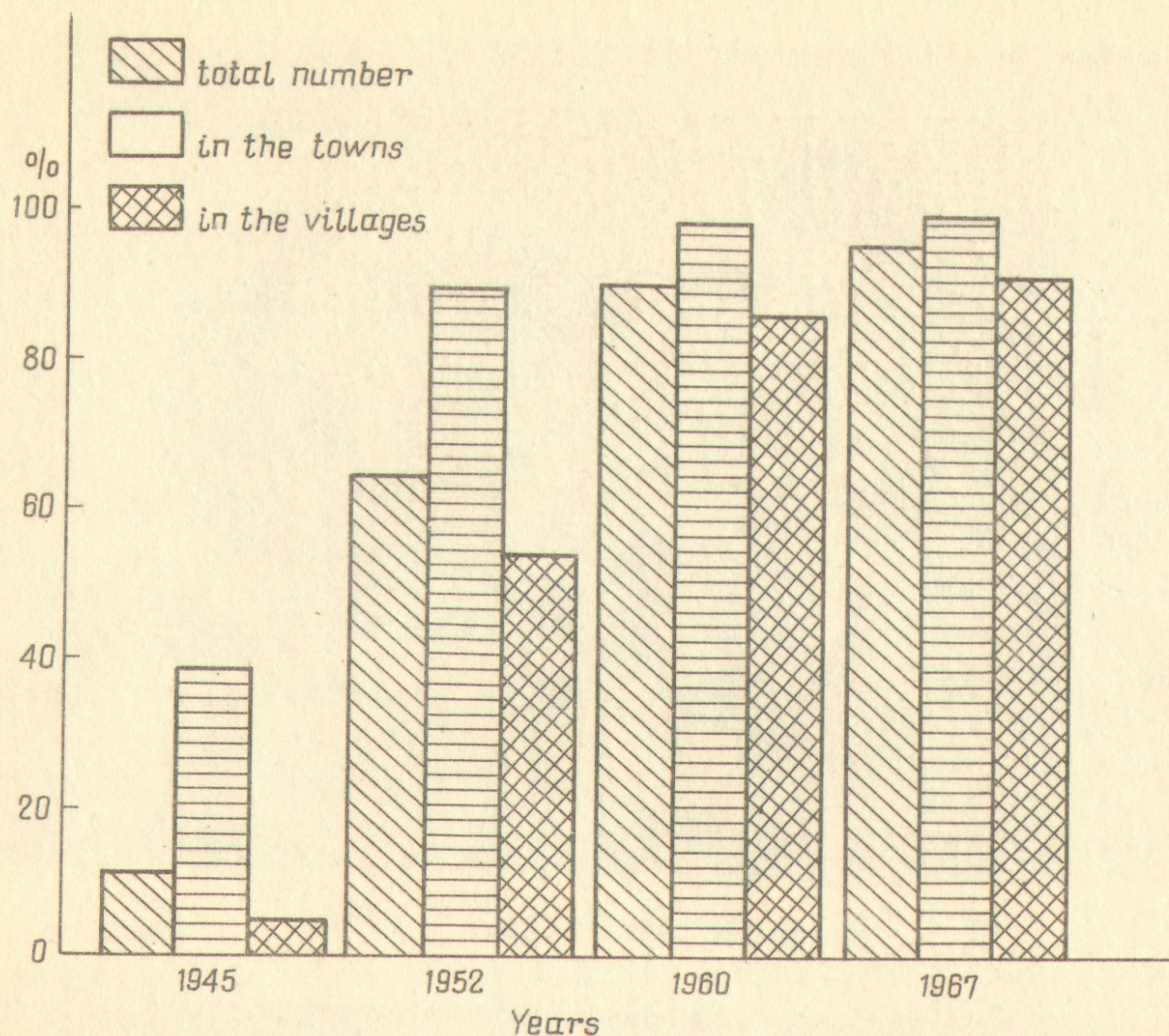


Fig. 9. The Ratio of Deliveries in Maternity Homes or Hospitals to the Total Number of Deliveries for the Period 1945-1967.

to 19 (Table 6).

The rate of increase of the number of medical nurses is the highest - from 372 in 1944 to 21743 in 1967 or more than 58 times. This process brought about a constant improvement of qualified medical, stomatological and secondary medical services for the population (Table 9, Fig. 10).

In Bulgaria, there was 1 physician per 576 inhabitants in 1967 against 1966 in 1944, whilst for stomatologists, accordingly





Rural Maternity Health Center



Balneo-sanatorium - Momin Prohod



Table 9

Medical Personnel<sup>1</sup> in the P.R. of Bulgaria for  
the 1944-1967 Period

	Y e a r s				
	1944 <sup>2</sup>	1948	1954	1960	1967
	A b s o l u t e   n u m b e r				
Physicians	3516	4906	8020	11051	14475
Stomatologists	824	1294	1971	2393	3013
Assistant doctors	826	475	1037	2865	4487
Midwives	1070	1797	1892	3364	4996
Medical nurses (pediatric included)	372	1558	6942	12502	21743
Laboratory assistants (clinical and X-ray)	.	.	1383	2499	4033
Dental mechanics	.	.	312	578	1048
	P e r   10000   i n h a b i t a n t s				
Physicians	5.1	6.8	10.7	14.0	17.4
Stomatologists	1.2	1.8	2.6	3.0	3.6
Assistant doctors	1.2	0.7	1.4	3.6	5.4
Midwives	1.6	2.5	2.5	4.3	6.0
Medical nurses (pediatric included)	0.5	2.2	9.1	15.8	26.1
Laboratory assistants (clinical and X-ray)	.	.	1.9	3.2	4.8
Dental mechanics	.	.	0.4	0.7	1.3

<sup>1</sup>The medical personnel of the Ministry of Interior, Ministry of Defence and Labour Conscription Service is excluded.

<sup>2</sup>Medical personnel in the private practice and unemployed included.



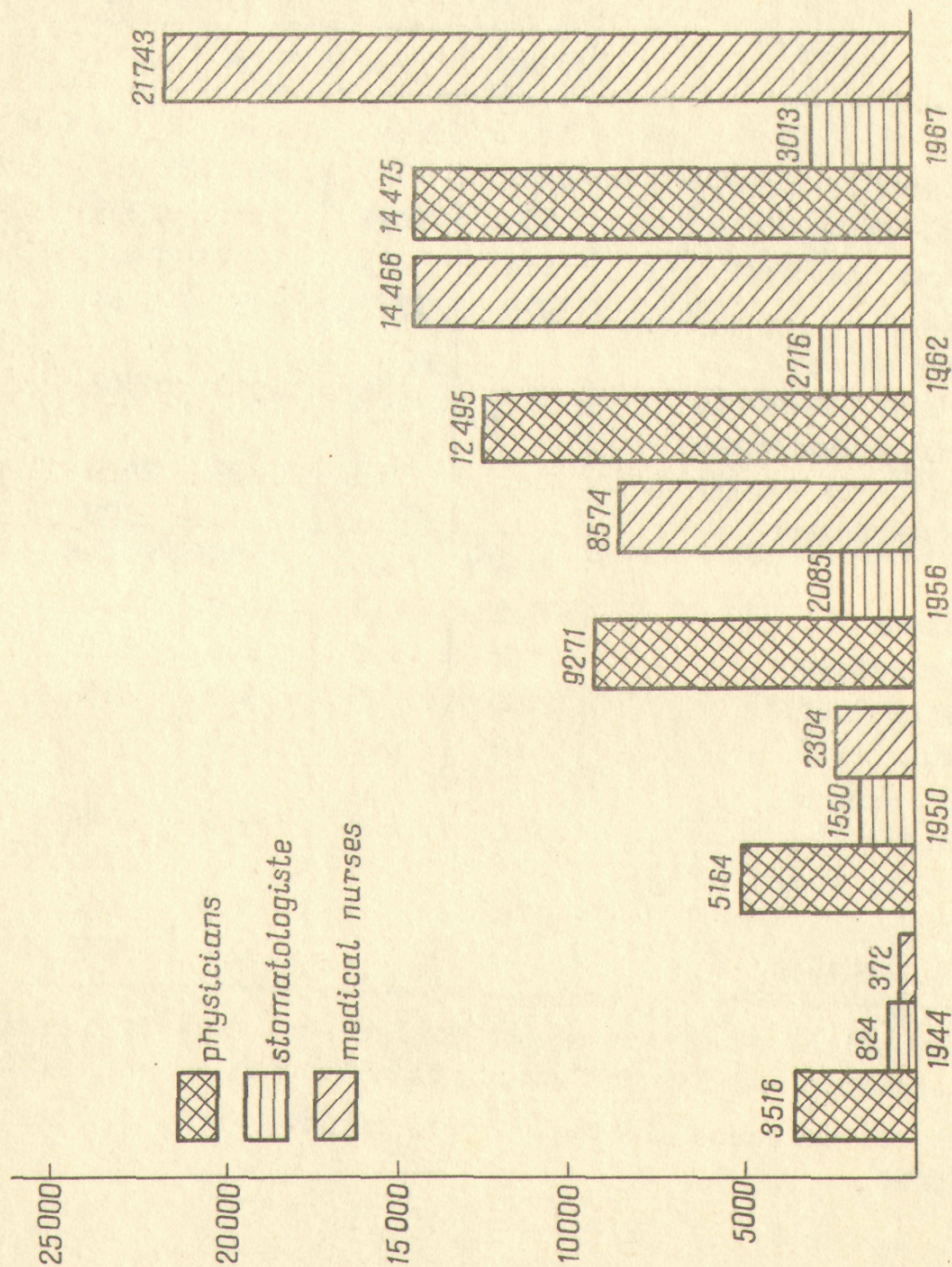
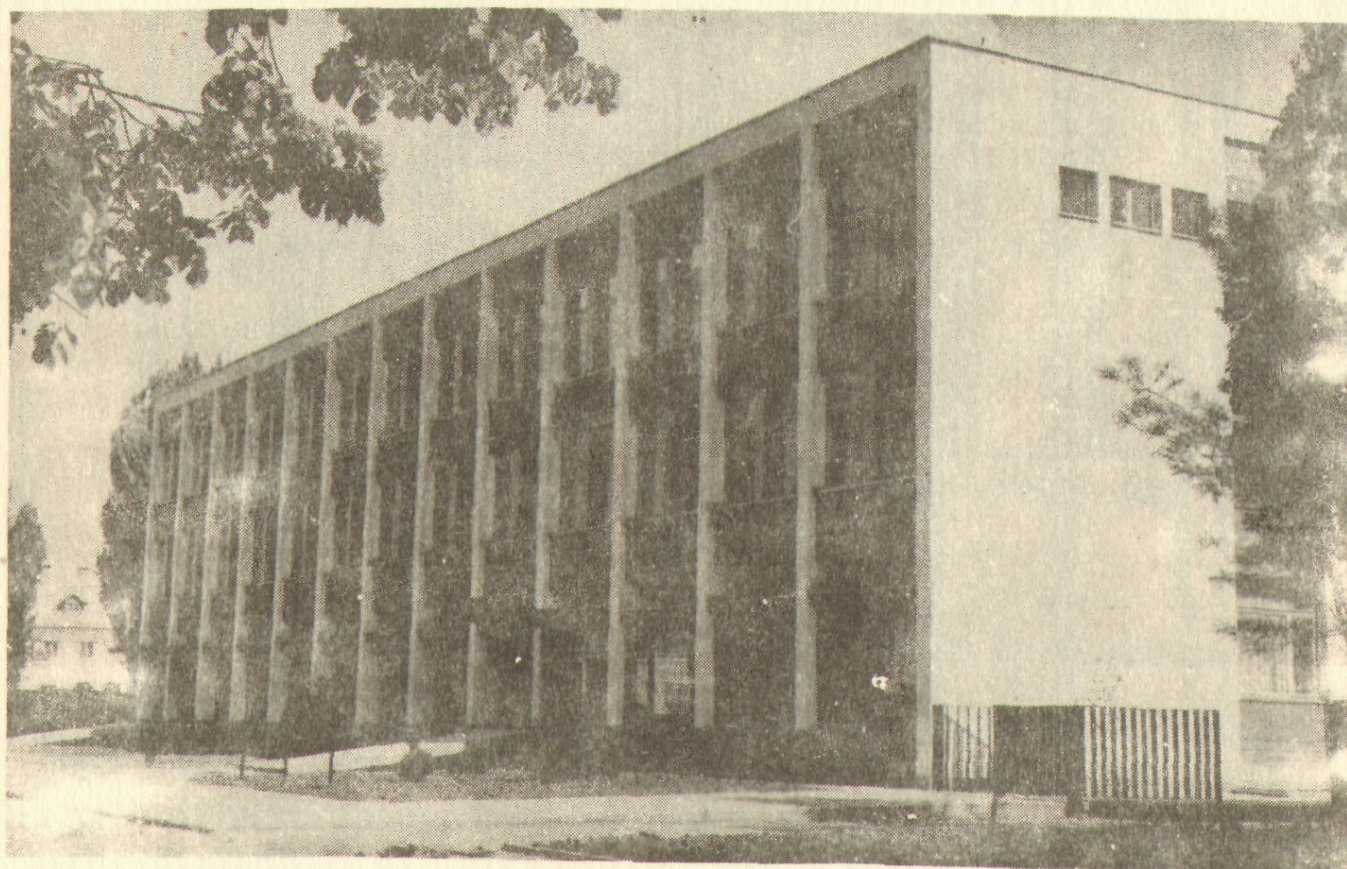


Fig. 10. Medical Personnel in Bulgaria.





Home for old and solitary persons (geriatric homes)



Hygienic-epidemiological Institute - Silistra



766 inhabitants per 1 stomatologist in 1967 and 8390 in 1944.  
(Fig. 11 and 12).

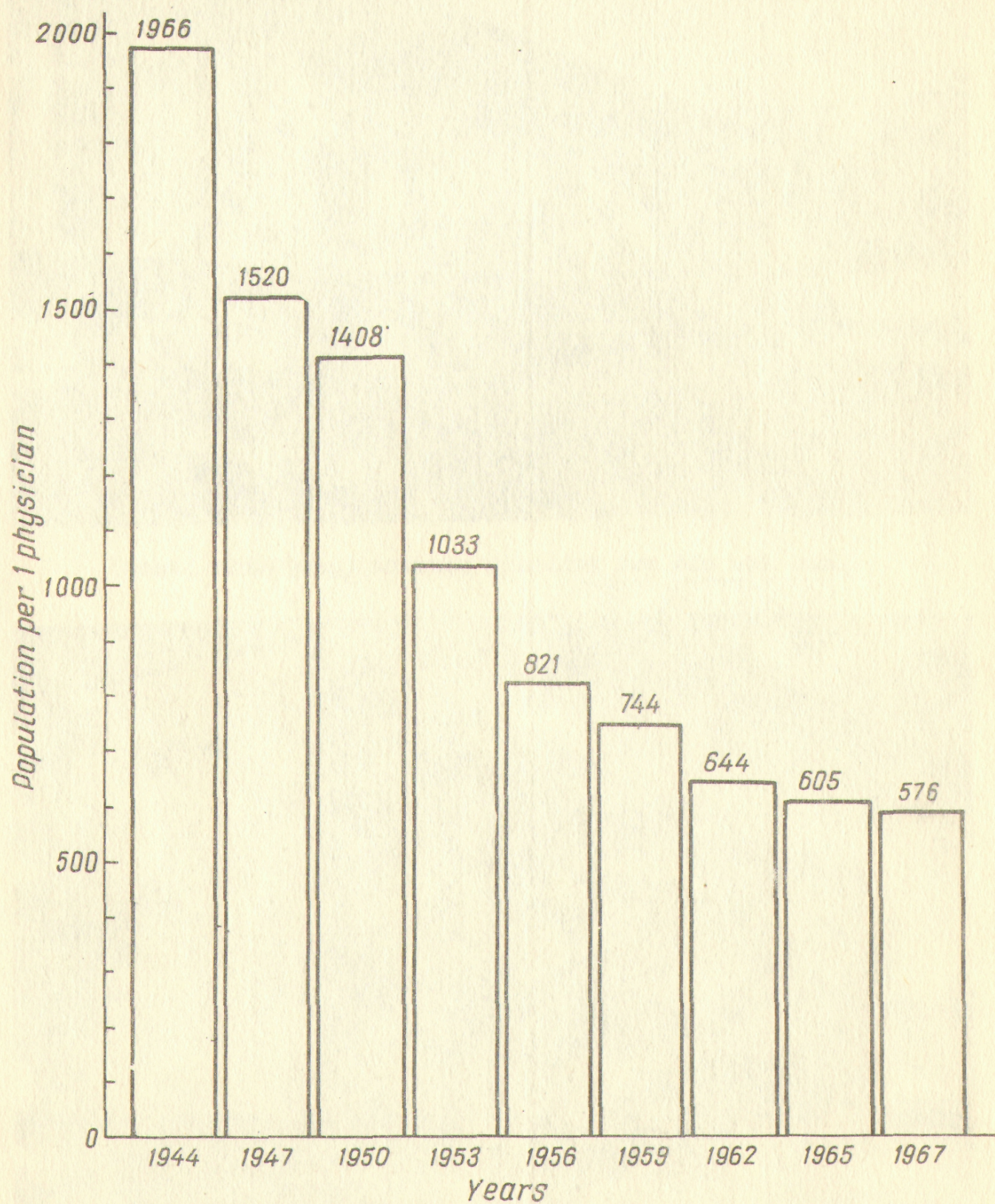


Fig. 11. Population per One Physician in Bulgaria.



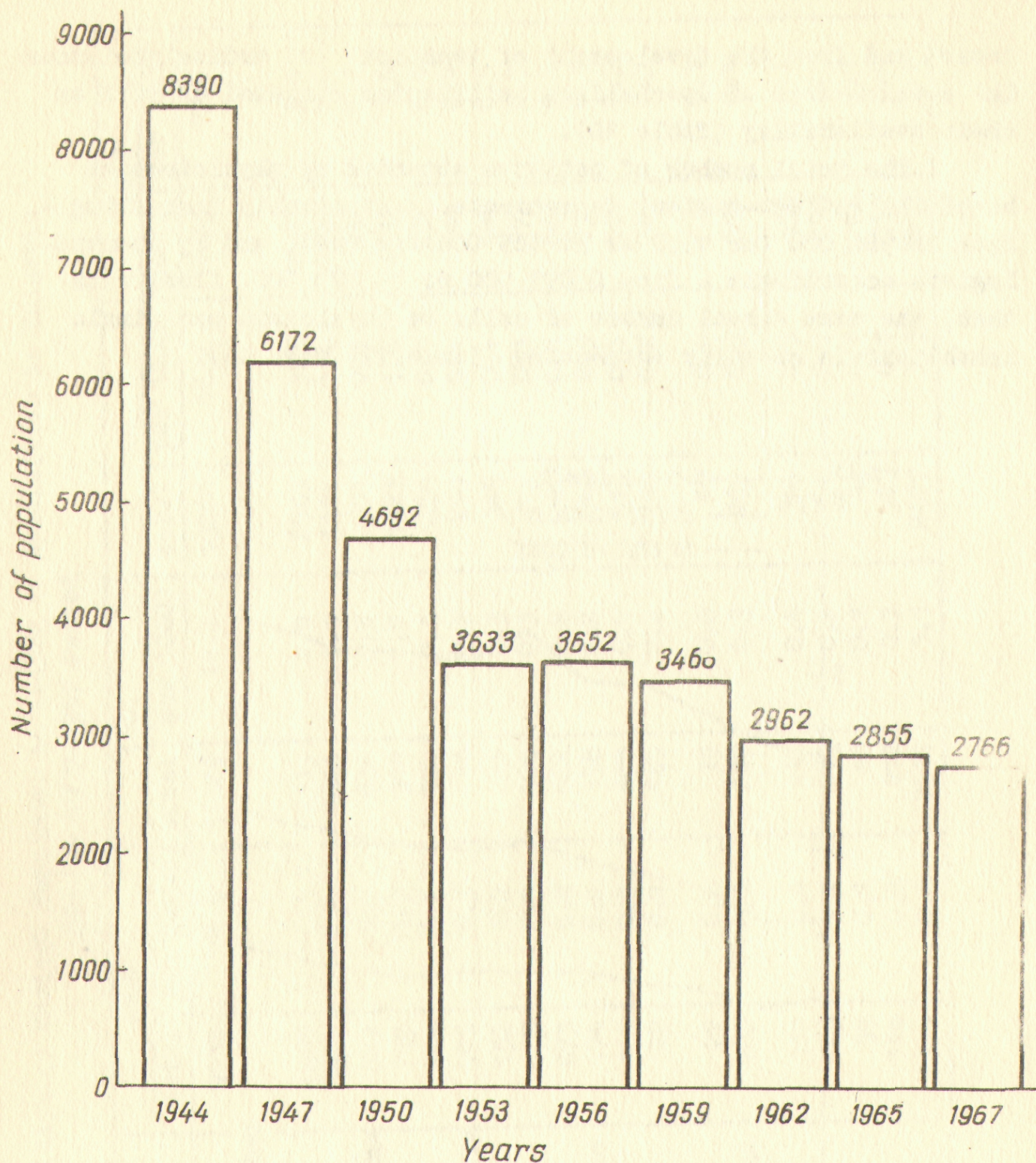


Fig. 12. Population per One Stomatologist in Bulgaria.

Specialized medical services have been similarly successfully developed; they should meet not merely the annual overall increase of population, but also the increased requirements of the same, resulting from the material and cultural progress of the



nation and from the development of technical and medical sciences. The total number of specialists is likewise elevated as well as their availability (Table 10).

The total number of patients attended by physicians at hospitals and out-patient departments is constantly increasing - from 24 986 000 for 1957 to 38 625 000 for 1967, and by stomatologists accordingly - from 6 091 000 to 10 073 500. Along with that, the mean annual number of calls to physicians per single inhabitant is steadily augmenting (Table 11, Fig. 13).

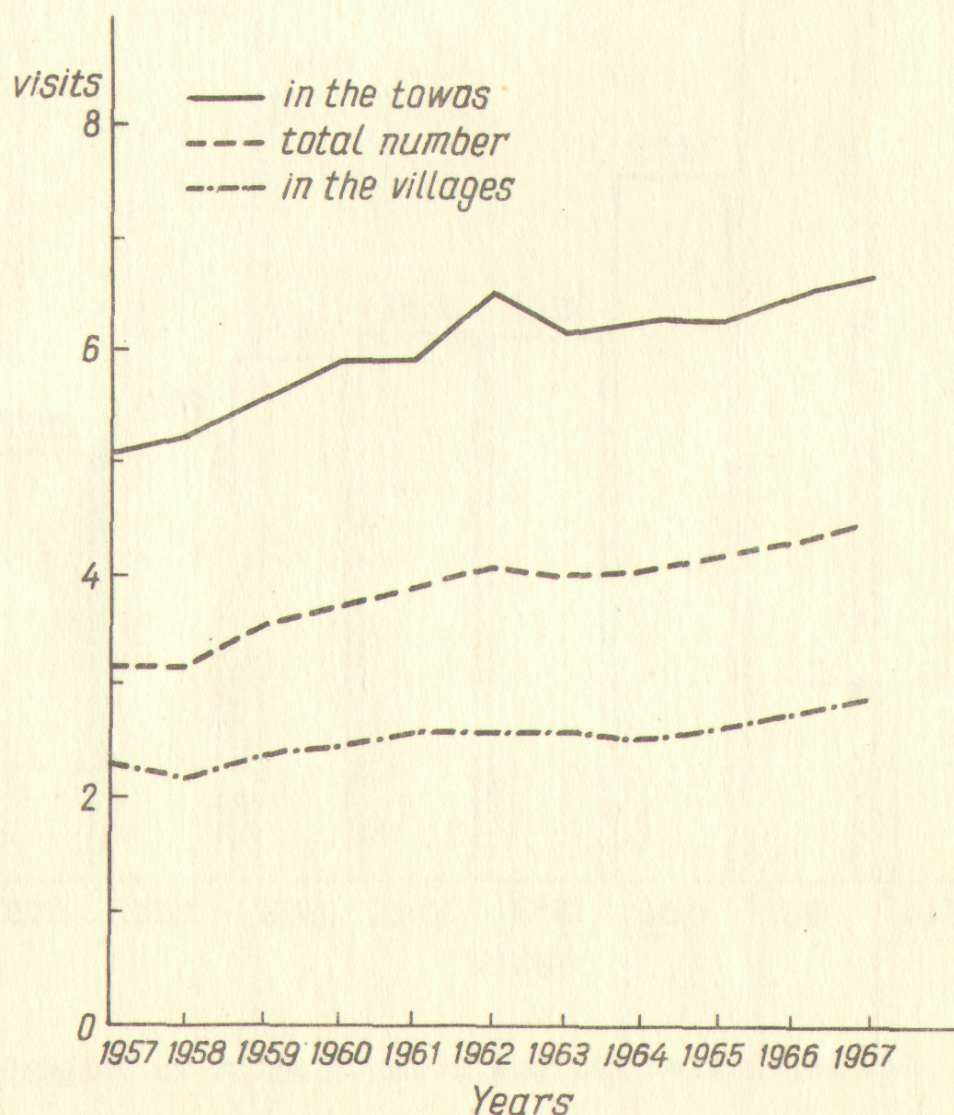


Fig. 13. Mean Annual Number of Calls per One Inhabitant to Physicians in Hospital and Outpatient-Poly-clinical Units, Covering the Period 1957-1967.



Table 10

Graduated (Higher) Medical Personnel According to Specialties in Bulgaria  
for the 1957-1967 Period

	1957		1961		1964		1967	
	total	per 10000	total	per 10000	total	per 10000	total	per 10000
Physicians	9935	12.9	11829	14.8	13260	16.2	14475	17.4
Out of the total number of physicians:								
Internists	1887	2.5	2313	2.9	2583	3.2	2843	3.4
Surgeons	817	1.1	1028	1.3	1171	1.4	1326	1.6
Surgeons-obstetricians	529	0.7	636	0.8	751	0.9	834	1.0
Pediatricians	749	1.0	915	1.7	1183	1.4	1359	1.6
Ophthalmologists	164	0.2	202	0.3	256	0.3	296	0.4
Otorhinolaryngologists	196	0.3	248	0.3	299	0.4	344	0.4
Neurologists	152	0.2	226	0.3	349	0.4	441	0.5
Psychiatrists	195	0.3	229	0.3	248	0.3	273	0.3
Phthysiatrists	673	0.9	622	0.8	691	0.8	668	0.8
Dermato-venerologists	174	0.2	198	0.2	244	0.3	277	0.3
Roentgenologists	366	0.5	488	0.6	516	0.6	561	0.7
Physical therapists	122	0.2	189	0.2	191	0.2	266	0.3
Remedial gymnastics therapists	27	0.0	19	0.0	27	0.0	45	0.1
Laboratory physicians	200	0.3	207	0.3	236	0.3	303	0.4
Sanitary physicians (hygienists)	310	0.4	334	0.4	369	0.5	350	0.4
Epidemiologists	162	0.2	173	0.2	176	0.2	173	0.2
Parasitologists	39	0.1	40	0.1	42	0.1	42	0.1
Microbiologists	144	0.2	212	0.3	303	0.4	311	0.4
Stomatologists	2171	2.8	2511	3.1	2877	3.5	3013	3.6



T a b l e 11

Professional Calls in Hospital and Out-Patient - Polyclinical Units

Years	Professional calls including mass prophylactical examinations (in thousands)			Domiciliary calls by physicians (in thousands)	Professional calls to stomatologists including mass prophylactical examinations (in thousands)		
	total	urban population	rural population		total	urban population	rural population
1957	24986,0	13484,4	11501,6	1530,9	6091,0	3485,1	2605,9
1958	25719,9	14421,1	11298,8	1578,5	6732,6	3982,7	2749,9
1959	27870,2	15981,5	11888,7	1967,2	7357,9	4548,9	2809,0
1960	29497,9	17180,5	12317,4	1874,2	7367,7	4431,5	2936,2
1961	30799,2	18086,9	12712,3	2000,8	8169,9	4921,8	3248,1
1962	33232,2	20355,2	12877,0	2506,9	8670,8	5403,8	3267,0
1963	32703,1	20314,1	12389,0	2404,1	9065,8	5846,9	3218,9
1964	33698,7	22163,7	11535,0	2423,0	9452,2	6363,0	3089,2
1965	35383,1	23875,8	11507,3	2466,2	9703,4	6764,2	2939,2
1966	36981,6	25241,1	11740,5	2417,5	9950,1	6951,3	2998,8
1967	38625,0	26392,2	12232,8	2674,6	10073,5	7020,0	3053,5



The emergency-aid network similarly shows progress. It is well known that the timely transport of emergency patients greatly increases the chances for favourable outcome of the urgent surgical intervention.

Helped by up to date technical achievements, the maneuverability of the ambulance cars is greatly improved and consequently the number of persons served grows annually.

In comparison to 1954, the number of persons served has augmented than six-fold, whilst the number of calls attended to - eight times (Fig. 14).

The actual stage of social development with the characteristic industrialization process and technical progress and the changes of the people's living and working conditions after September 9th, 1944 posed new demands upon our socialist health policy.

In view of meeting these new prophylactic medicine requirements, i.e. not merely protecting the health and working ability of individuals, but constantly improving their physical and mental health the setting of specialized hygienic-epidemiological institutes proved to be necessary. During the years of people's government, these institutions developed as a fundamental part of public health organization and are supposed to collaborate for further improvement of the general sanitary state on a nationwide scale and safeguard the health of our people. The number of sanitary-epidemiological stations is incessantly increasing and from 84 in 1952 they reached 126 in 1956.

In addition to sanitary-healing activities in the work of sanitary-epidemiological stations (SES), the adoption of modern sanitary rules (normatives) for living and economical development is equally important for restricting infectious diseases' wide-spreading and sanitation of the working environments.

The recent SES reorganization was rendered necessary on account of the substantial changes taking place in the economical and social development of our country.

The 12 central hygienic-epidemiologic institutes and 27 epidemiologic branches - I and II category - are set out as large complex units, capable of carrying out comprehensive analy-



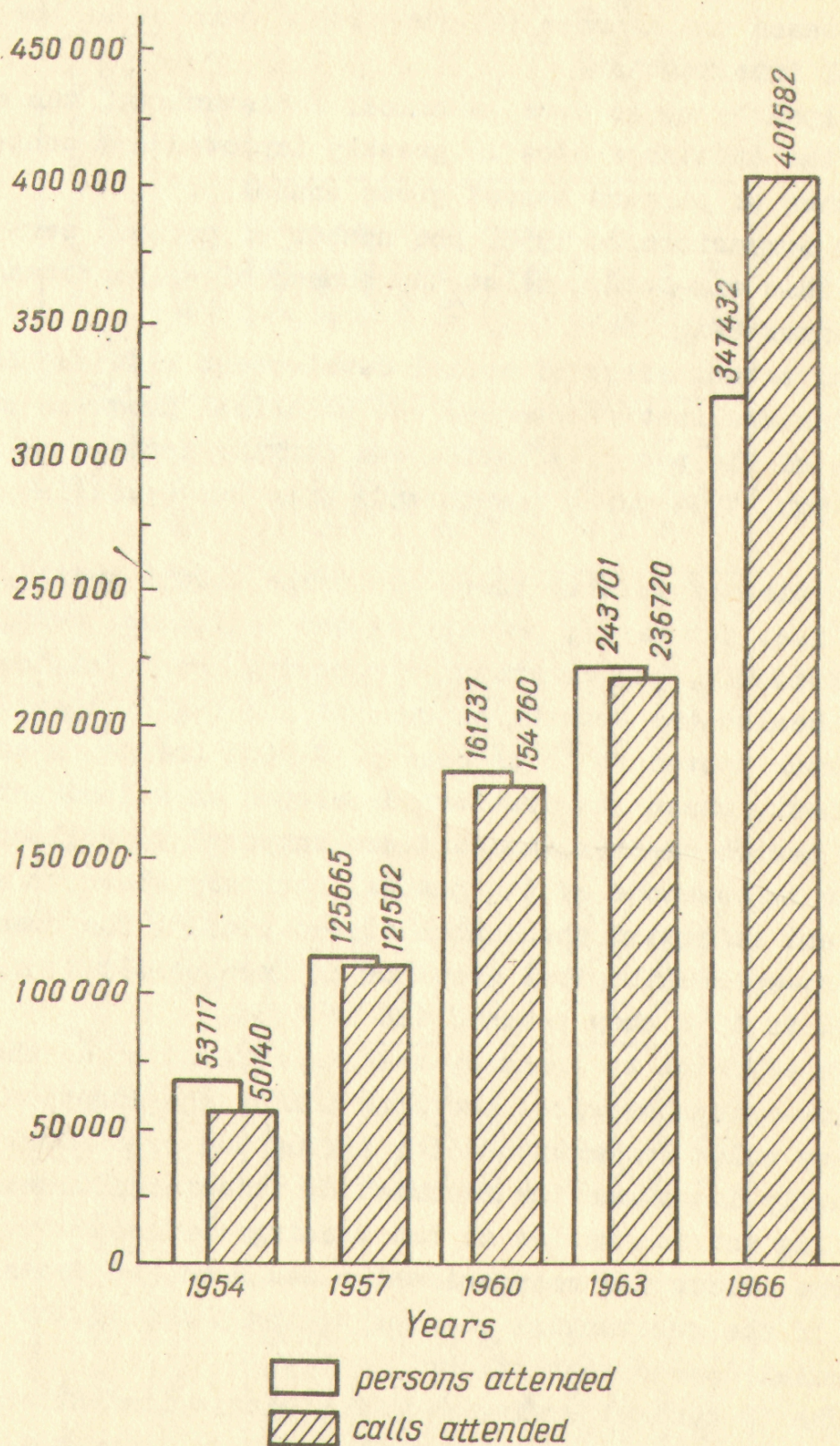


Fig. 14. Calls and Persons Attended in Bulgaria over the Period 1954-1966.



sis of the milieu factors as well as of becoming invaluable assistants of the governing authorities in the proper planning of their activities, complied with the requirements of the modern progressive science.

The number of physicians working in this field is continuously growing. In 1967 it reached the figure 615. Simultaneously with the increase of physicians, the number of chemists, physicists, biologists, engineers and other specialists is likewise increased since a complete diagnosis of the noxious factors of the environment in which we are living, could be established merely on the basis of complex investigation of the various problems by the team composed of different specialists.

It is difficult to list all the activities of the hygienic-epidemiologic institutes evolved for the period of 25 years of people's government. Actually, the water-supplied communities amount to 3130 against 1026 in 1944, whilst the number of the water-supplied villages - to 2955 against 951 in 1944. The green areas, including gardens and parks in the towns are also augmenting. From 912 (38788 quarter acres) in the towns in 1944 they become 4873 with 395 996 1/4 acres in 1966.

Today, the sanitary-hygienic conditions in the modern industrial establishments of Bulgaria are incomparable with the heavy working conditions in the shops and factories existing before September 9th, 1944. Preliminary sanitary control accomplishes competent assessment of the projects for the construction and building of new plants, schools and the like to the end of securing the most favourable working milieu for the working people.

At present, the hygienic-epidemiologic institutes make definite progress equally in terms of theoretical and practical development of prophylactic medicine.



PUBLIC HEALTH  
IN THE PEOPLE'S REPUBLIC OF BULGARIA  
DURING THE YEARS OF PEOPLE'S GOVERNMENT (1944-1968)

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